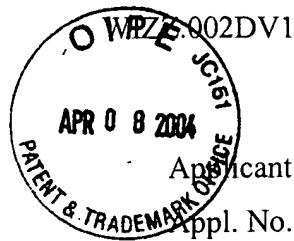


3624

*\$*

PATENT



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Teddy A. Demirjian  
 Appl. No. : 09/658,332  
 Filed : September 8, 2000  
 For : TRANSACTION AND ACCOUNT  
       MANAGEMENT SYSTEM  
 Examiner : Sally Shih  
 Group Art Unit : 3624

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

April 5, 2004

(Date)

Tom R. Arno, Reg. No. 40,490

AMENDMENT

RECEIVED

APR 13 2004

GROUP 3600

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated October 3, 2003, Applicant submits the following amendment and remarks for consideration in the above-referenced patent application. Applicant thanks the Examiner for reviewing the instant application.

04/09/2004 CCHAU1 00000144 09658332  
 475.00 OP  
 01 FC:2253



## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Teddy A. Demirjian  
 App. No. : 09/658,332  
 Filed : September 8, 2000  
 For : TRANSACTION AND  
ACCOUNT MANAGEMENT  
SYSTEM  
 Examiner : S. Shih  
 Art Unit : 3624

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April 5, 2004

(Date)

Thomas R. Arno, Reg. No. 40,490

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

RECEIVED

APR 13 2004

GROUP 3600

Transmitted herewith for filing in the above-identified application are the following enclosures:

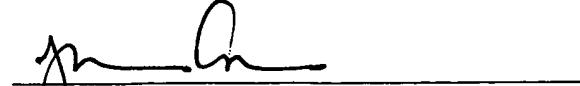
- Amendment in 6 pages.
- The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	3 - 20 = 0	2202 (\$9)	0 x 9 =	\$0
Independent Claims	1 - 5 = 0	2201 (\$43)	0 x 43 =	\$0
Multiple Claim		2203 (\$145)		\$0
3 Month Extension		2253 (\$475)		\$475
			<b>TOTAL FEE DUE</b>	<b>\$475</b>

- An extension of time is hereby requested by payment of the appropriate fee indicated above.

- (X) A check in the amount of \$475 is enclosed.
- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Thomas R. Arno  
Registration No. 40,490  
Attorney of Record  
Customer No. 20,995  
(619) 235-8550